



Sign Permit Application

City of Charleston

I. Instructions: Complete form and submit with required information and fee to **Planning, Preservation and Sustainability**, 75 Calhoun Street, 3rd floor. Incomplete submittals will not be processed.

II. General Information for all Signs:

Address at sign location: _____ TMS: _____ Zoning of Parcel: _____
Business Name (at sign location): _____
Sign Co.: _____ Your Name: _____ Phone: _____
Email: _____ Is the location of the sign(s) within the jurisdiction of:
Board of Architectural Review (BAR)? Yes/No **Commercial Corridor Design Review Board (CCDRB)?** Yes/No

III. For Submittals with Multiple signs: For applications with more than two proposed signs, please complete and attach a Sign Permit Application Attachment.

IV. Submittal Requirements:

A. Material and Color Samples for proposed sign(s).

B. Photographs of all existing signs on the property (to remain or be removed) and photographs of where the new signs will be located. Note on the photographs which signs are to remain and which are to be removed.

C. Scaled & Dimensioned Site Plan showing location of proposed sign(s), existing sign(s) to remain and existing sign(s) to be removed and their distances to property lines and driveways (for freestanding signs only).

D. Scaled and Dimensioned Elevation Drawings of Proposed Sign(s). Note proposed location(s), materials & colors. Measure sign face area as the entire area within a rectangle enclosing the extreme limits of the sign face, including any frame or border.

E. How many of each type of sign are you proposing?

_____ Freestanding (Monument, Fence/Wall, or Directional)
_____ Façade (On the Building: Flat, Right Angle, or Canopy/Awning)
_____ Window

Sign # _____ Type of Sign: _____ Letter type & Illumination: _____
Sign face height: _____ ft. x face width: _____ ft. = sign face: _____ sq. ft. Total Height if Freestanding: _____
If Flat Façade Sign: Building Height: _____ ft X Building Width: _____ ft = _____ sqft X .10 = _____ sqft max
If Canopy Sign: Surface Height: _____ ft X Surface Width: _____ ft = _____ sqft X .20 = _____ sqft max
If Window Sign: Window Height: _____ ft X Window Width: _____ ft = _____ sqft X .20 = _____ sqft max

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Applicant Signature: _____

FOR OFFICE USE ONLY: Date application received _____ Staff person _____ Fee \$ _____ Receipt # _____

BAR: _____ Date: _____ ☐ Approved ☐ Approved w/conditions ☐ Disapproved
CCDRB: _____ Date: _____ ☐ Approved ☐ Approved w/conditions ☐ Disapproved
Zoning: _____ Date: _____ ☐ Approved ☐ Approved w/conditions ☐ Disapproved
Conditions of Approval: _____